

MISSOURI DEPARTMENT OF NATURAL RESOURCES  
MISSOURI OIL AND GAS COUNCIL

## APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

☐ APPLICATION TO DRILL    ☐ DEEPEN    ☐ PLUG BACK    ☐ FOR AN OIL WELL    ☒ OR GAS WELL

NAME OF COMPANY OR OPERATOR

John (40r) Donna Paal

DATE

ADDRESS

19401 E 236th

CITY

Harrisonville

STATE

Mo

ZIP CODE

64701

## DESCRIPTION OF WELL AND LEASE

NAME OF LEASE

None

WELL NUMBER

1

ELEVATION (GROUND)

Unknown ~ 960'

WELL LOCATION

(GIVE FOOTAGE FROM SECTION LINE)

WELL LOCATION

SECTION

29

TOWNSHIP

45N

RANGE

31W

COUNTY

Cass

NEAREST DISTANCE FROM PROPOSED LOCATION TO PROPERTY OR LEASE LINE ~ 350' FEET

DISTANCE FROM PROPOSED LOCATION TO NEAREST DRILLING, COMPLETED OR APPLIED — FOR WELL ON THE SAME LEASE — FEET

PROPOSED DEPTH

270'

DRILLING CONTRACTOR, NAME AND ADDRESS

Jesse Yocum Well Drilling

ROTARY OR CABLE TOOLS

Rotary

APPROX. DATE WORK WILL START

7/15/97

NUMBER OF ACRES IN LEASE

NUMBER OF WELLS ON LEASE, INCLUDING THIS WELL, COMPLETED IN OR DRILLING TO THIS RESERVOIR 1

NUMBER OF ABANDONED WELLS ON LEASE

IF LEASE PURCHASED WITH ONE OR MORE WELLS DRILLED, FROM WHOM PURCHASED?

NAME

ADDRESS

NO. OF WELLS: PRODUCING 1

INJECTION

INACTIVE

ABANDONED

STATUS OF BOND

☒ SINGLE WELL  
AMOUNT \$ 402.00☐ BLANKET BOND  
AMOUNT \$☐ ON FILE  
☒ ATTACHED

REMARKS: (IF THIS IS AN APPLICATION TO DEEPEN OR PLUG BACK, BRIEFLY DESCRIBE WORK TO BE DONE, GIVING PRESENT PRODUCING ZONE AND EXPECTED NEW PRODUCING ZONE; USE BACK OF FORM IF NEEDED.)

## PROPOSED CASING PROGRAM

## APPROVED CASING — TO BE FILLED IN BY STATE GEOLOGIST

AMOUNT	SIZE	WT/FT	CEM.	AMOUNT	SIZE	WT/FT	CEM.
266	4"	5ch 40 Steel Slurry		266'	4"	40"	TD-Surface

I, the undersigned, state that I am the owner of the property (company), and that I am authorized by said company to make this report, and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct, and complete to the best of my knowledge.

SIGNATURE

Johnny Paul Donna Paul

DATE

7/2/97

PERMIT NUMBER

20644

☒ DRILLER'S LOG REQUIRED☒ E-LOGS REQUIRED IF RUN☒ CORE ANALYSIS REQUIRED IF RUN☒ DRILL STEM TEST INFO. REQUIRED IF RUN☐ SAMPLES REQUIRED☒ SAMPLES NOT REQUIRED☐ WATER SAMPLES REQUIRED AT

APPROVAL DATE

by phone E.K. 7/16/97

APPROVED BY

Jesse Alan Yocum, SAs

NOTE THIS PERMIT NOT TRANSFERABLE TO ANY OTHER PERSON OR TO ANY OTHER LOCATION

APPROVAL OF THIS PERMIT BY THE OIL AND GAS COUNCIL DOES NOT CONSTITUTE ENDORSEMENT OF THE GEOLOGIC MERITS OF THE PROPOSED WELL NOR ENDORSEMENT OF THE QUALIFICATIONS OF THE PERMITTEE.

I Jesse Alan Yocum, owner of the Jesse Yocum Well Drilling Company confirm that an approved drilling permit has been obtained by the owner of this well. Council approval of this permit will be shown on this form by presence of a permit number and signature of authorized council representative.

DRILLER'S SIGNATURE

Jesse Alan Yocum

DATE

8/18/97



MISSOURI DEPARTMENT OF NATURAL RESOURCES  
MISSOURI OIL AND GAS COUNCIL  
**WELL LOCATION PLAT**

20644

FORM OGC-4

OWNER <u>John &amp; or Donna Paul</u>	
LEASE NAME <u>Paul #1</u>	COUNTY <u>Cass</u>
____ FEET FROM ____ SECTION LINE AND ____ FEET FROM ____ SECTION LINE OF SEC. ____ , TWP ____ N, RANGE ____ <small>(N) - (S) (E) - (W)</small>	



SCALE  
1" =


REMARKS

<p align="center"><b>INSTRUCTIONS</b></p> <p>On the above plat, show distance of the proposed well from the two nearest section lines, the nearest lease line, and from the nearest well on the same lease completed in or drilling to the same reservoir. Do not confuse survey lines with lease lines. See rule 10 CSR 50-2.030 for survey requirements. Lease lines must be marked.</p>	<p>This is to Certify that I have executed a survey to accurately locate oil and gas wells in accordance with 10 CSR 50-2.030 and that the results are correctly shown on the above plat.</p> <p align="right">(SEAL)</p>		
<p align="center">REMIT TWO (2) COPIES TO: MISSOURI OIL AND GAS COUNCIL P.O. BOX 250, ROLLA, MO 65401</p>	<table border="1" style="width:100%"><tr><td style="width:70%;">REGISTERED LAND SURVEYOR</td><td style="width:30%;">NUMBER</td></tr></table>	REGISTERED LAND SURVEYOR	NUMBER
REGISTERED LAND SURVEYOR	NUMBER		



MISSOURI DEPARTMENT OF NATURAL RESOURCES  
MISSOURI OIL AND GAS COUNCIL  
WELL COMPLETION OR RECOMPLETION REPORT AND WELL LOG

Form OGC-5

☐ NEW WELL ☐ WORKOVER ☐ DEEPEN ☐ PLUG BACK ☐ INJECTION ☐ SAME RESERVOIR ☐ DIFFERENT RESERVOIR ☐ OIL ☒ GAS ☐ DRY

OWNER <i>John (tor) Donna Paul</i>		ADDRESS <i>19401 E 236th Harrisonville Mo 64701</i>	
LEASE NAME <i>None Paul</i>		WELL NUMBER <i>#1</i>	
LOCATION <i>1600 FNL 680 FEL</i>		SEC. TWP. AND RANGE OR BLOCK AND SURVEY <i>29-45-31</i>	
COUNTY <i>CASS</i>	PERMIT NUMBER (OGC-3 OR OGC-31) <i>20644</i>		
DATE SPUDDED <i>7/15/97</i>	DATE TOTAL DEPTH REACHED <i>7/15/97</i>	DATE COMPLETED READY TO PRODUCE OR INJECT <i>7/19/97</i>	ELEVATION (DF, RKR, RT, OR Gr.) FEET <i>UNK</i>
TOTAL DEPTH <i>270'</i>		ELEVATION OF CASING HD. FLANGE <i>18" above gdr</i>	
PRODUCING OR INJECTION INTERVAL(S) FOR THIS COMPLETION <i>266' - 270'</i>		ROTARY TOOLS USED (INTERVAL) <i>TO 270</i>	
WAS THIS WELL DIRECTIONALLY DRILLED? <i>NO</i>		DRILLING FLUID USED <i>φ</i>	
WAS DIRECTIONAL SURVEY MADE? <i>NO</i>		WAS COPY OF DIRECTIONAL SURVEY FILED? <i>N/A</i>	
TYPE OF ELECTRICAL OR OTHER LOGS RUN (LIST LOGS FILED WITH THE STATE GEOLOGIST) <i>N/A</i>		DATE FILED <i>N/A</i>	

CASING RECORD

CASING (REPORT ALL STRINGS SET IN WELL - CONDUCTOR, SURFACE, INTERMEDIATE, PRODUCING, ETC.)

PURPOSE	SIZE HOLE DRILLED	SIZE CASING SET	WEIGHT (LB. FT)	DEPTH SET	SACKS CEMENT	AMOUNT PULLED
<i>Producing</i>	<i>6 1/8"</i>	<i>4" ID</i>	<i>Sch 40 Steel</i>	<i>266'</i>	<i>4 yds 6 gal/sk</i>	<i>φ</i>

TUBING RECORD

LINER RECORD

SIZE	DEPTH SET	PACKER SET AT	SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN
<i>none</i> IN.	— FEET	— FEET	— INCH	— FEET	— FEET	—	— FEET

PERFORATION RECORD

ACID, SHOT, FRACTURE, CEMENT SQUEEZE RECORD

NUMBER PER FOOT	SIZE AND TYPE	DEPTH INTERVAL	AMOUNT AND KIND OF MATERIAL USED	DEPTH INTERVAL
<i>open hole method</i>	—	—	—	—

INITIAL PRODUCTION

DATE OF FIRST PRODUCTION OR INJECTION <i>7/19/97</i>		PRODUCING METHOD (INDICATE IF FLOWING, GAS LIFT, OR PUMPING — IF PUMPING, SHOW SIZE AND TYPE OF PUMP.) <i>flowing gas</i>				
DATE OF TEST <i>7/15/97</i>	HOURS TESTED <i>.5</i>	CHOKE SIZE <i>3/8"</i>	OIL PRODUCED DURING TEST — bbls.	GAS PRODUCED DURING TEST <i>8740 CF/DAY</i> MCF	WATER PRODUCED DURING TEST <i>φ</i> bbls.	OIL GRAVITY — API (CORR.)
TUBING PRESSURE —	CASING PRESSURE <i>40 PSI</i>	CALC'D RATE OF PRODUCTION PER 24 HOURS <i>8740 CF/DAY</i> 0 bbls.		GAS AS REPORTED MCF <i>φ</i>	WATER <i>φ</i> bbls.	GAS OIL RATIO <i>N/A</i>
DISPOSITION OF GAS (STATE WHETHER VENTED, USED FOR FUEL OR SOLD) <i>test gas vented</i>						
METHOD OF DISPOSAL OF MUD PIT CONTENTS <i>N/A</i>						

CERTIFICATE: I, THE UNDERSIGNED, STATE THAT I AM THE OWNER OF THE property COMPANY, AND THAT I AM AUTHORIZED BY SAID COMPANY TO MAKE THIS REPORT, AND THAT THIS REPORT WAS PREPARED UNDER MY SUPERVISION AND DIRECTION AND THAT THE FACTS STATED THEREIN ARE TRUE, CORRECT AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DATE <i>9/2/97</i>	SIGNATURE <i>Johnny Paul Donna Paul</i>
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**INSTRUCTIONS:** ATTACH DRILLERS LOG OR OTHER ACCEPTABLE LOG OF WELL.

\* SHOW ALL IMPORTANT ZONES OF POROSITY, DETAIL OF ALL CORES, AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES.

**DETAIL OF FORMATIONS PENETRATED**

FORMATION	TOP	BOTTOM	DESCRIPTION (SEE * ABOVE)
	0	5	Loose rock
	5	16	Gray clay
	16	20	White limestone
	20	38	Lt gray shale
	38	43	Gray limestone
	43	208	Shale
	208	215	Limestone
	215	233	Shale
	233	242	Limestone
	242	248	Shale
	248	266	Black limestone
	266	270	Slate - gas